Pre-Trip Safety Check

Trip number	Vessel number
Life Saving Equipment (circle Y :	for yes or N for no)
Safety Examination Decal? Y / N	Decal Number:
	Date of issuance:/
EPIRB present? Y / N	battery expiration:/
	mm / yyyy
Distress flares present? Y/N Orange ring buoy with line attache	
Inflatable Life Raft* Y / N Cap	pacity for all POB? Y/N
Personal Floatation Device for each	ch POB* Y / N
Immersion suit for each POB?(requi	red above 32'00 N latitude) Y / N
Fire Fighting Equipment	
Fire Extinguishers charged? Y / I	N
Location 1	
Location 2	
Location 3	
the information above is accurate. Observer:	/
Owner/Operator:	/
	mm/dd/yyyy
Minimum I for	Requirements
	ing Vessels (Offshore 20+ miles)
All vessels fishing 20+ miles offs board(POB).	shore with fewer than 16 persons on
1. Orange ring buoy with 60'	line
2. Personal floatation Device	
 Inflatable life raft* (consolas B 20-50 miles cold miles) 	astal pack 20-50 miles warm water, water and SOLAS A for anywhere 50+
4. 3 parachute flares6 hand flares3 smoke flares	
5. EPIRB(406 MHZ category I,	free floating and auto activating)
6. 3 TYPE B-1 Fire extinguis	hers(mounted)
7. At least one person certi	fied in First Aid and CPR

imes Type required dependent on distance offshore and water temperature